

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Reno</u>		NW 1/4 NW 1/4 NW 1/4	<u>33</u>	T <u>24</u> S	R <u>4</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>1 1/4 miles North of Haven</u>					
2 WATER WELL OWNER: <u>Kenny Schmidt</u>					
RR#, St. Address, Box # : <u>11205 S. Haven Rd.</u>					
City, State, ZIP Code : <u>Haven, KS 67543</u>					
Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>90</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>15</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <u>9</u> in. to <u>90</u> ft. and in. to ft.			
WELL WATER TO BE USED AS:					
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well <u>Stock</u>					
Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u> If yes, mo/day/yr sample was sub- mitted					
Water Well Disinfected? Yes <u>X</u> No					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded Blank casing diameter <u>5</u> in. to <u>50</u> ft. Dia. in. to ft. Dia. in. to ft. Casing height above land surface <u>24</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>.214</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) SCREEN OR PERFORATION OPENINGS ARE: 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>90</u> ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>90</u> ft. to <u>20</u> ft. From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>Hole Plug</u>					
Grout Intervals: From <u>20</u> ft. to <u>0</u> ft. From ft. to ft. From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage					
Direction from well? <u>East</u> How many feet? <u>200'</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top Soil			
3	18	Gray clay			
18	25	Tan Clay			
25	39	Medium Sand & Gravel			
39	52	Tan Clay			
52	64	Gray Clay & Sand Mix			
64	77	Tan Clay & Sand Mix			
77	90	Medium Sand & Gravel/Clay bits			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12-11-97</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>12-26-97</u>					
under the business name of <u>Rosencrantz-Bemis Ent. Inc.</u> by (signature) <u>Alicia Coffey</u>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					